Bibliographic Information Application Data Sheet (ADS)

Inventor Information
Inventor One Given Name:: Michael
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Name Suffix::
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Mailing Address Line Two::
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Postal or Zip Code:: 02481

City of Residence:: Wellesley Hills
State or Prov. of Residence:: MA
Country of Residence:: USA

Citizenship Country:: US

[repeat for additional inventors]

Correspondence Information
Name Line One:: Kevin M. Farrell
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City:: Portsmouth
State or Province:: NH
Country:: USA
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Application Information
Title Line One:: BANDAGE FOR WOUND OR INCISION CLOSURE
Title Line Two::
[Repeat for any additional lines]
Suggested classification::
Suggested Tech. Center::
Total Drawing Sheets:: 6
Suggested Dwg. Figure for Pub.:: 1
Docket Number:: 0156-2003US02
Application Type:: Utility

Licensed US Govt. Agency::

Contract or Grant Numbers One::
Contract or Grant Numbers Two::
Secrecy Order in Parent Appl.?:: [Yes or No]

If plant parent app.,
Latin name of genus and species of plant claimed::

Representative Information
Registration Number One:: 35,505
Registration Number Two::
[Repeat for extra registration numbers]

Domestic Priority Information
This application is a:: Continuation of
Application One:: 10/014,832
Filing Date:: December 11, 2001

which is a:: Continuation-in-Part of
Application Two:: 09/450,488
Filing Date:: November 29, 1999
[repeat as necessary]

Foreign Application Information
Foreign Application One::
Filing Date::
Country::
Priority Claimed: [Yes or No]

Assignee Information
Name of assignee:: ClozeX Medical, LLC
Address Line One:: 16 Laurel Avenue
Address Line Two:: Suite 200
City:: Wellesley
State or Province:: MA
Country:: USA
Postal or Zip Code:: 02481-7530